

CORPORATE OFFICER DESIGNATION

Business Name: _____ License No. _____

☐ There has been no change in our officer designation

IF YES, FILL OUT INFORMATION BELOW FOR ALL NEW OFFICERS.

RESPONSIBLE PARTIES

| FULL NAME FIRST & LAST NAME | TITLE | HOME ADDRESS (No PO Boxes) PHYSICAL ADDRESS, CITY, STATE, ZIP | DATE OF BIRTH | SOCIAL SECURITY NO. | DRIVERS LICENSE NO. |
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☐ There has been no change in the percentage of significant financial interest (10% or greater)

INDIVIDUALS, PARTNERS, MEMBERS, CHIEF EXECUTIVE OFFICERS/PRESIDENTS OR CHIEF FINANCIAL OFFICERS/TREASURERS AND ALL INDIVIDUALS AND/OR ENTITIES WHICH HOLD A SIGNIFICANT FINANCIAL INTEREST (10% OR GREATER) MUST COMPLETE THE FOLLOWING: (If a partner or member is a Partnership, LLC or Corporation, identify and provide the following information for all individuals of each entity which hold a significant financial interest (10% or greater) and include a current organizational chart.)

FINANCIAL INTEREST

| FULL NAME FIRST & LAST NAME | TITLE | % | HOME ADDRESS (No PO Boxes) PHYSICAL ADDRESS, CITY, STATE, ZIP | DATE OF BIRTH | SOCIAL SECURITY NO. | DRIVERS LICENSE NO. |
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Pursuant to the provisions of Chapter 6 and/or 7, Division 20 of the Food and Agricultural Code, State of California, each applicant must provide the above information to obtain license(s) to conduct business in farm products. Each individual has the right to review files maintained on them by Market Enforcement.

Signature

Date

Print or Type Name

Title (Owner, Partner, Member or Corporate Officer)